United States Department of the Interior

NATIONAL PARK SERVICE
Mojave National Preserve
2701 Barstow Road
Barstow, California 92311

APPLICATION REQUIREMENTS for a SPECIAL PARK USE PERMIT

In response to your inquiry concerning Special Park Uses, enclosed is a Special Park Use Application Worksheet for you to complete and return to us. It is important that the worksheet be as detailed as possible concerning your proposed activity. For example, we must know where you propose to conduct your activity or event, the number of participants, what type of equipment you will use, *and* any special provisions you may have.

If you are not familiar with the area, it is advisable to make an advance-scouting trip for routes and/or locations. You will not be permitted to arrive and then select routes/locations on the day of the event. For guided tours, sporting events or other organized gatherings, you will need to attach a copy of advertisements, flyers, brochures, and all information sent to participants.

Requests for filming, commercial photography or other commercial operations require a different application form.

The information on the worksheet will be utilized by National Park Service (NPS) staff to evaluate the impact of your activity on park resources and visitors, the appropriate type of permit, and any additional fees required. It may require several weeks to review your request and render a decision.

A non-refundable application fee of $69.00 is required from all applicants, regardless of whether or not the permit is issued. This payment must accompany the permit worksheet. Payment must be made to the **National Park Service**.

The NPS has the authority to collect or recover from Special Park Use permit holders any or all of the costs associated with the special use activities. If the request requires independent review, administrative processing costs (at minimum, $217.00) and monitoring costs (minimum of two hours at $45.00/hour) may also be collected.

If your request is approved, a Certificate of Insurance will be required showing that you have general liability insurance coverage of $1,000,000. This certificate must name the **United States of America** as "additional insured." Other coverage limits may be required based on the requested activity. If required, we will need an **original** certificate of insurance for our files. The permit holder's name must be on the Certificate of Insurance.

A performance bond may also be required. The amount of the bond will be determined from the information provided on the worksheet. It may be paid by bond or cashier's check. This bond will be returned to you upon completion of your activity if all stipulations have been met and park resources have not been damaged.

Please submit the enclosed Application Worksheet and your application fee (payable to the National Park Service) via to the address below. You may post, email or fax the worksheet to:

National Park Service
Mojave National Preserve
Attention: Special Use Permits
2701 Barstow Road
Barstow, CA 92311

tel: (760) 252-6107
fax: (760) 252-6174
email: moja_sup@nps.gov

Payment of the application fee must be received before an application can be processed. Contact Mojave National Preserve for more information.

NPS Form 10-930
OMB No. 1024-0026
NEW 10/00
Expires 6/30/2013

National Park Service
Mojave National Preserve
2701 Barstow Road, Barstow, CA 92311
(760) 252-6107

Application for Special Use Permit

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. Allow **AT LEAST** 4 business days for processing (2 business days for First Amendment requests). A non-refundable processing fee should accompany this application unless the requested use is an exercise of a First Amendment right. You will be notified of the disposition of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America as also insured.

Applicant Name:	Organization Name:
Social Security #:	Tax ID #
Street/Address:	Street/Address:
City/State/Zip Code:	City/State/Zip Code:
Telephone #:	Telephone #:
Cell phone #:	Cell phone #:
Fax #:	Fax#:
E-mail:	E-mail:

Description of Proposed Activity (attach diagram, attach additional pages if necessary):

Requested Location:

Date(s):

Event set up will begin: (date and time)	Event will begin: (date and time)	Event will end: (date and time)	Removal will be done: (date and time)

Maximum Number of Participants_____ (Please provide best estimate)

Maximum Number of Vehicles _____(attach parking plan)

Support Equipment (list all equipment; attach additional pages if necessary)

_____

_____

_____

_____

_____

_____

_____

List support personnel (contractors, etc. including addresses and telephones attach additional pages if necessary)_____

_____

_____

_____

Individual in charge of event on site (include address, telephone and cell phone numbers):

_____

Is this an exercise of First Amendment Rights? ☐Y ☐N
Are you familiar with/ have you visited the requested area? ☐Y ☐N
Have you obtained a permit from the National Park Service in the past? ☐Y ☐N
(If yes, provide a list of permit dates and locations on a separate page.)
Do you plan to advertise or issue a press release before the event? ☐Y ☐N
Will you distribute printed material? ☐Y ☐N
Is there any reason to believe there will be attempts to disrupt, protest or prevent your event?(If yes, please explain on a separate page.) ☐Y ☐N
Do you intend to solicit donations or offer items for sale?
(These activities may require an additional permit.) ☐Y ☐N

The applicant by his or her signature certifies that all the information given is complete and correct, and that no false or misleading information or false statements have been given.

Signature _____ Date _____

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Information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the form of a cashiers check or money order in the amount of $69.00 made payable to **National Park Service**. Credit card payments may be accepted at some parks. Application and administrative charges are non-refundable. *This completed application should be mailed to **Special Park Uses Coordinator** at the Park address found on the first page of this application.*

Note that this is an application only, and does not serve as permission to conduct any use of the park. If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible

person and returned to the park prior to the event for final approval by the Park Superintendent.

NOTICES

Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required by this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number or activities subject to collection of fees by the National Park Service (31 U.S.C. 7701) Information from the application may be transferred to appropriate Federal, State, local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement): This information is being collected subject to the Paperwork Reduction Act (44 U.S.C. 3501) to allow the park manager to make a value judgment on whether or not to allow the requested use. All applicable parts of the form must be completed. A Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service, Special Park Uses Program Manager, 1849 C Street NW (2460), Washington, D.C. 20240.